

PLUMBING APPLICATION

PROPERTY ADDRESS

Town or Plantation Lamoine
 Street or Subdivision Lot # Lydia's Lane Lot #24

PROPERTY OWNER(S) NAME

Last: Richardson First: Christopher

Applicant Name: 137 Lydia's Lane

Mailing Address of Owner/Applicant (if Different) Lamoine Maine

Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspector(s) to deny a permit.

Signature of Owner/Applicant

Date

6/27/17

Department of Health and Human Services
 Division of Environmental Health

Town/City Lamoine Permit # 1838
 Date Permit Issued 6/27/17 Fee: \$ 150.00 Double Fee Charged []
 Local Plumbing Inspector Signature [Signature] L.P.I. # 1040
 Fee: \$ _____ State min. fee \$ _____ Locally adopted fee
 Copy: [] Owner [] Town [] State Map # _____ Lot # _____ Local

The Internal Plumbing Fixtures and Piping shall not be installed until a Permit is issued by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the plumbing system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules Application.

Date Approved (Rough-in)

LPI Signature

Date Approved (Final)

PERMIT INFORMATION

This Application is for

1. ☒ NEW PLUMBING
2. ☐ RELOCATED PLUMBING

Type of Structure to be Served

1. ☐ SINGLE FAMILY RESIDENCE
2. ☒ MODULAR OR MOBILE HOME
3. ☐ MULTIPLE FAMILY DWELLING
4. ☐ OTHER-SPECIFY _____

Plumbing to be Installed by:

Chad Pichett

1. ☒ MASTER PLUMBER
2. ☐ OIL BURNERMAN
3. ☒ MFG'D HOUSING DEALER / MECHANIC
4. ☐ PUBLIC UTILITY EMPLOYEE
5. ☐ PROPERTY OWNER

LICENSE # MS60007477

Hook-Up & Piping Relocation Maximum of 1 Hook-Up

Column 2 Number Type of Fixture

Column 1 Number Type of Fixture

<input type="checkbox"/> HOOK-UP: to public sewer by those cases where the connection is not regulated and inspected by the local sanitary district.	<input checked="" type="checkbox"/> Hosebib / Sillcock	Bathtub (and Shower)
<input type="checkbox"/> Floor Drain	<input type="checkbox"/> Urinal	Shower (separate)
<input type="checkbox"/> Drinking Fountain	<input type="checkbox"/> Indirect Waste	Sink
<input type="checkbox"/> Water Treatment Softener, Filter, Etc.	<input type="checkbox"/> Grease / Oil Separator	Wash Basin
<input type="checkbox"/> Roof Drain	<input type="checkbox"/> Bidet	Water Closet (Toilet)
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Fixtures (Subtotal) Column 2	Clothes Washer
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Dish Washer
		Garbage Disposal
		Laundry Tub
		Water Heater

OR

☐ TRANSFER FEE
 [\$10.00]

SEE PERMIT FEE SCHEDULE
 FOR CALCULATING FEE

☐ Owner ☐ Town Copy ☐ State Copy

TOTAL FIXTURES

Fixture Fee
 Transfer Fee
 Hook-Up & Relocation Fee
PERMIT FEE (TOTAL)